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SERIAL NUMBER 10/690,808	FILING DATE 10/22/2003 RULE	CLASS 072	GROUP ART UNIT 3725	ATTORNEY DOCKET NO. OD05/01					
APPLICANTS Richard Brown, Anaheim, CA; Michael Kenneth Walker, Seal Beach, CA;									
** CONTINUING DATA ***** <u>NONE</u> ***** <i>DMW</i>									
** FOREIGN APPLICATIONS ***** <u>NONE</u> ***** <i>DMW</i>									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 02/02/2004									
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Edward P. Dutkiewicz</i> Examiner's Signature <i>DMW</i> Initials </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> STATE OR COUNTRY CA </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> SHEETS DRAWING 4 </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> TOTAL CLAIMS 3 </td> <td style="width: 10%; border-bottom: 1px solid black; text-align: center;"> INDEPENDENT CLAIMS 2 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Edward P. Dutkiewicz</i> Examiner's Signature <i>DMW</i> Initials	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 2
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ADDRESS 49716 EDWARD P. DUTKIEWICZ, ESQ. EDWARD P. DUTKEIWICZ, P.A. 640 DOUGLAS AVENUE DUNEDIN, FL 34698-7001									
TITLE Pick and place system									
FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> </table>					<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	
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